**C:\Users\Jessica Addington\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\IZWQC4SF\MC900357551[1].wmf**

**Video Podcast   
PARENTAL/GUARDIAN CONSENT FORM**

This form must be completed by all participants appearing in the video podcast or credited in its production, and signed by parent or guardian. We will post both video and audio podcasts on our classroom website. Students may use podcasting to showcase what they have learned. Other students from our class and other classes may view the podcasts to learn about various topics. We will also share our podcasts with students across the globe through the iEARN website. Students will learn about students all over the world by watching other student’s podcasts.

The form must be returned to the school before filming can begin. Please submit one form per participant.

Participant

School Name:

First Name: Last Name: Age:

Home Address: Apt.:

City: State: Postal Code:

Home Phone: ( )  E-mail Address:

We/I hereby grant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Student name) the right to:

(Please check one. Participants under 18 years of age must have this filled out by a parent or guardian.)

Use a photograph and/or recording produced on film, video, audio/tape of my child .

In granting these rights, we/I understand that we/I hereby release the school and its employees from all actions, causes of actions, claims and demands, except for those arising from the negligence of the school and its employees.

Signature of Parent/Guardian :   
  
 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Date)